

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Democratic Congressional Campaign Committee		FEC IDENTIFICATION NUMBER <b>C</b> C00000935	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mission Control, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 114 A Mansfield Holow Rd.		Amount 8308.11	
City State Zip Code Mansfield Center CT 06250		Transaction ID: SE-856803	
Purpose of Expenditure Mail Services		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type 006		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Charles D Brown		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
788726.89		Date of Dissemination 10/29/08	
Full Name (Last, First, Middle, Initial) of Payee Mission Control, Inc.		Date MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 114 A Mansfield Holow Rd.		Amount 8308.11	
City State Zip Code Mansfield Center CT 06250		Transaction ID: SE-856804	
Purpose of Expenditure Mail Services		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
Category/Type 006		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Thomas McClintock		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
788726.89		Date of Dissemination 10/29/08	
(a) SUBTOTAL of Itemized Independent Expenditures .....		16616.22	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Jonathan S. Vogel Signature		Date MM / DD / YYYY 07 / 09 / 2009	